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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Karen A. Hayden

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/847,004	05/01/2001	R. Shawn Childress	14518	4809

TITLE OF INVENTION: PREPARATION OF SECONDARY AMINOISOBUTYLALKOXYSILANES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/06/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
ROBERTSON, JEFFREY		1712	556-413000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

General Electric Company

Pittsfield, MA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies \_\_\_\_\_

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2033 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-0888 (enclose an extra copy of this form).

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(Authorized Signature)

Kenneth S. Wheelock, 36,340

(Date)

08/06/2004

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TRANSMIT THIS FORM WITH FEE(S)



Application No: 09/847,004  
Filing Date: 05/01/2001

US 142506-2

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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Washington, D.C. 20231

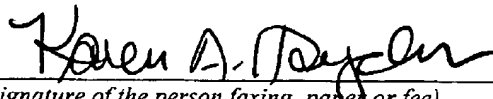
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Date of Deposit : **August 6, 2004**

I hereby certify that this correspondence (total of 3 pages) is being facsimile transmitted to the US Patent and Trademark Office's Automated Patent and Trademark Patent Publication for Issue Fee system: (703) 746-4000 on **August 6, 2004**.

Karen A. Hayden

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